

**REQUEST FOR AFFIDAVIT TO RECONVENE  
THE KING COUNTY BOARD OF APPEALS/EQUALIZATION**

{WAC 458-14-127 (1)(b)}

Account (Parcel) No. \_\_\_\_\_

Assessment Year \_\_\_\_\_ for Tax Year \_\_\_\_\_

I hereby request that the Assessor submit an affidavit requesting that the Board of Equalization reconvene to hear my appeal of the Assessor's determination of value for the property noted above.

This request is based on my belief that the Assessor was unaware of facts which were discoverable at the time of the appraisal, and that such lack of facts caused the valuation of the property to be materially affected. I request a review of the facts and evidence as described in the attached documents.

If the Assessor concurs, and the Board accepts my appeal, I understand that I will be required to complete a Real Property Petition (if I have not already done so) and submit it in duplicate to the Board of Appeals within thirty days of the date of the Assessor's affidavit.

Name of Owner (Print)	Name of Agent (Who will represent me - Print)
Street Address or Box No.	Street Address Or Box No.
City, State Zip	City, State Zip
Daytime Phone	Daytime Phone

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Date

**NOTE: This form and attachments must be filed by April 30<sup>th</sup> of the tax year**  
500 Fourth Avenue, Suite 510 Seattle WA 98104-2306  
(206) 296-3496 (TDD: 206-296-1024)

All BOE forms available in alternate format upon request